



Brighton's Help For Homes for Seniors and the Disabled 2020 APPLICATION

All personal information is necessary, but confidential

NAME		D	DATE	
ADDRESS				
PHONE				
Personal Information				
1. Are you 60 or older?	Yes □	No □		
2. Are you permanently physically disabled?		Yes □	No 🗆	
3. Do you receive SSDI Disability?	Yes □	No □		
4. Do you live alone?	Yes □	No □		
5. If you do not live alone, give the <i>n</i> Name	ame, age o Age		•	
6. What is your average monthly inco	ome?			
7. If others (other than spouse) live in of the household? Yes □	n your hou No □	se, do they co	intribute financially to the running	
8. Do you have short-term plans to se	ell vour ho	me or move?	Yes □ No □	

Home Information 1. Do you own your own home? Yes □ No □ 2. Name the **three** outside home repairs or improvements that you would most like to see done at your home. (Time and money limitations may not permit all of these things to be done.) □ Painting ☐ Yard Work □ Bush / Limb Removal ☐ Gutter Cleaning ☐ Fascia / Soffit Repair ☐ Fencing Repair □ Other 3. Have you received help in the past from Help for Homes? Yes \square No \square To the best of my knowledge the above information is correct. Yes \square No \square Applicant's Signature Date Applicants must supply the following documentation with the completed application: (All information will be private and confidential) Copy of Letter from Social Security with Monthly Amount and / or Copy of Letter documenting SSDI Monthly Amount, if disabled Verification of Home Ownership (such as property tax form)

Please note that we will do our best to serve as many citizens as funding allows.

Proof of Living in Home (such as United Power bill)

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Deadline is March 20, 2020

Return all applications with required attachments to the Eagle View Adult Center, 1150 Prairie Center Parkway Brighton, Colorado 80601 Attention: Evon Benitez For more information, call 303-655-2079.